

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
MCGUIREWOODS LLP

Full Name (Last, First, Middle Initial) A. Douglas W. Ey Jr.		Date of Receipt <div> <div>M M M / D D D / Y Y Y Y Y Y</div> <div>02 / 28 / 2015</div> </div> Transaction ID : SA11AI.45964	
Mailing Address 201 North Tryon Street Suite 3000		Amount of Each Receipt this Period <div> <div>292.18</div> </div>	
City Charlotte	State NC	Zip Code 28202	
FEC ID number of contributing federal political committee. <div>C</div>		Contribution	
Name of Employer McGuireWoods	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div>567.52</div>		
Full Name (Last, First, Middle Initial) B. Thomas M Farrell		Date of Receipt <div> <div>M M M / D D D / Y Y Y Y Y Y</div> <div>02 / 28 / 2015</div> </div> Transaction ID : SA11AI.45965	
Mailing Address 600 Travis Street Suite 7500		Amount of Each Receipt this Period <div> <div>353.69</div> </div>	
City Houston	State TX	Zip Code 77002	
FEC ID number of contributing federal political committee. <div>C</div>		Contribution	
Name of Employer McGuireWoods	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div>686.92</div>		
Full Name (Last, First, Middle Initial) C. Howard Feller		Date of Receipt <div> <div>M M M / D D D / Y Y Y Y Y Y</div> <div>02 / 28 / 2015</div> </div> Transaction ID : SA11AI.45966	
Mailing Address One James Center 901 East Cary Street		Amount of Each Receipt this Period <div> <div>430.57</div> </div>	
City Richmond	State VA	Zip Code 23219	
FEC ID number of contributing federal political committee. <div>C</div>		Contribution	
Name of Employer McGuireWoods	Occupation Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div>836.16</div>		
SUBTOTAL of Receipts This Page (optional)..... ▶		<div>1076.44</div>	
TOTAL This Period (last page this line number only)..... ▶		<div></div>	